

Revision: HCFA-PM-91-4 (BPD)
AUGUST 1991

OMB No.: 0938-

State/Territory: OHIO

Citation 3.2 Coordination of Medicaid with Medicare and Other Insurance

(a) Premiums

(1) Medicare Part A and Part B

1902(a)(1)(E) and
1905(p) of the Act

(i) Qualified Medicare Beneficiaries (QMB)

The Medicaid agency pays Medicare Part A premiums (if applicable) and Part B premiums for individuals in the QMB group defined in Item A.26 of ATTACHMENT 2.2-A, by the following method:

- ☐ Group premium payment arrangement for Part A
- ☒ Buy-In agreement for
- ☒ Part A ☒ Part B
- ☐ Other arrangements described below.

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State OHIO

Citation

1902 (a) (E) (ii)
and 1905 (s) of the Act

(ii) Qualified Disabled and Working
Individual (QDWI)

The Medicaid agency pays Medicare Part A premiums under a group premium payment arrangement, subject to any contribution required as described in ATTACHMENT 4.18-E, for individuals in the QDWI group defined in item A.26 of ATTACHMENT 2.2-A of this plan.

1902 (a) (10) (E) (iii)
and 1905 (p) (3) (A) (ii)
of the Act

(iii) Specified Low-Income Medicare
Beneficiary (SLMB)

The Medicaid agency pays Medicare Part B premiums under the State buy-in process for individuals in the SLMB group defined in item A.27 of ATTACHMENT 2.2-A of this plan.

1902 (a) (10) (E) (iv) (I),
1905 (p) (3) (A) (ii), and
1933 of the Act

(iv) Qualifying Individual - 1
(QI-1)

The Medicaid agency pays Medicare Part B premiums under the State buy-in process for individuals described in 1902 (a) (10) (E) (iv) (I) and subject to 1933 of the Act.

1902 (a) (10) (E) (iv) (II),
1905 (p) (3) (A) (ii), and
1933 of the Act

(v) Qualifying Individual - 2
(QI-2)

The Medicaid agency pays the portion of the amount of increase to the Medicare Part B premium attributable to the Home Health Provision to the individuals described in 1902 (a) (10) (E) (iv) (II) and subject to 1933 of the Act.

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State OHIO

Citation

1843 (b) and 1905 (a)
of the Act and
42 CFR 431.625

(vi) Other Medicaid Recipients

The Medicaid agency pays Medicare Part B premiums to make Medicare Part B coverage available to the following individuals:

X All individuals who are: (a) receiving benefits under titles I, IV-A, X, XIV, or XVI (AABD or SSI); b) receiving State supplements under title XVI; or c) within a group listed at 42 CFR 431.625 (d) (2).

— Individuals receiving title II or Railroad Retirement benefits.

— Medically needy individuals (FFP is not available for this group).

1902 (a) (30) and
1905 (a) of the Act

(2) Other Health Insurance

— The Medicaid agency pays insurance premiums for medical or any other type of remedial care to maintain a third party resource for Medicaid covered services provided to eligible individuals 65 years of age or older and disabled individuals, entitled to Medicare Part A but not enrolled in Medicare Part B.

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Citation (b) Deductibles/Coinsurance

(1) Medicare Part A and B

Section 1902(n)
of the Act

Attachment 4.19-B describes the methods and standards for establishing payment rates for services covered under Medicare, and/or the methodology for payment of Medicare deductible and coinsurance amounts, to the extent available for each of the following groups.

Sections 1902
(a)(10)(E) and
1905(p) of the Act

(i) Qualified Medicare Beneficiaries (QMBs)

The Medicaid agency pays deductibles and coinsurance for QMBs (subject to any nominal Medicaid copayment) for all services available under Medicare.

42 CFR 431.625
1902(a)(10)(E) and
1903(a)(1) of the Act

(ii) Other Medicaid Recipients

The Medicaid agency pays Medicare deductibles and coinsurance (subject to any nominal Medicaid copayment) for services furnished to individuals who are described in section 3.2(a)(1)(iii) above, as follows:



For the entire range of services available under Medicare. Part B



Only for the amount, duration, and scope of services otherwise available under this plan.

(iii) Dual Eligible--OMB plus Other Medicaid Recipients

The Medicaid agency pays deductibles and coinsurance for services furnished to individuals eligible both as QMBs and categorically or medically needy (subject to any nominal Medicaid copayment) for all services available under Medicare.

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